

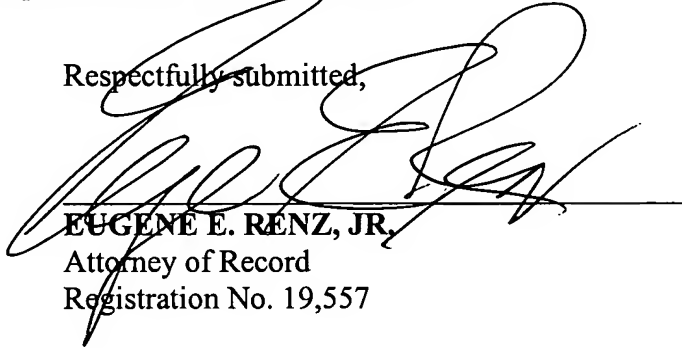
**REMARKS**

Claims 1-6, inclusive have been canceled.

Claims 7 and 8 have been added. An Action on the merits is respectfully requested.

The Commissioner is hereby authorized to charge any required fees, charge any deficiencies and credit any overpayments to deposit account number **18-0990**.

Respectfully submitted,



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